

## **Workforce Development Workgroup**

Michigan Long-Term Care Supports and Services Commission  
Meeting Notes  
May 14, 2008

Attendees: John King, Craig Nobbelin, Michelle Munson-McCorry, Dave Jackson, Jules Isenberg-Wedel, Jean Peters, Lauren Swanson, Rosemary Ziemba, Jillian Rainwater, Chris Hennessey

### **1. Welcome, Introductions, Review of Agenda, Review of March Notes**

Attendees introduced themselves and shared their favorite sight, sound, or smell of Spring. Minutes from March meeting were accepted without revision.

### **2. Next steps for CNA training and program administration legislation and changes**

Hollis presented a one page summary memo that will be presented to the full Commission at their Monday meeting. Since the last workgroup meeting, endorsements from Michigan County Medical Care Facilities Council, Center on Frail and Vulnerable Elders, U of MI School of Nursing, The Alzheimer's Association, Hospice of Michigan, Area Agency on Aging 1-B, Tri-County Office on Aging, AARP/Michigan, Citizens for Better Care, Michigan Long Term Care Ombudsman Program, Healthcare Regional Skills Alliance, NW MI Council of Governments, Michigan Dementia Coalition, TEACH, Olmstead Coalition, Area Agencies on Aging of Michigan, Campaign for Quality Care, UAW, Michigan Home Health Association, Cassie Stern Healthcare Workers Training and Education Center, SEIU, Healthcare Michigan, and Michigan Office on Services to the Aging have been received. Indications thus far from HCAM are positive and a letter of endorsement is expected as long as allowable costs are considered. **UPDATE SINCE MEETING-- The workforce recommendations were unanimously approved at the 5/19/08 LTCSS Commission meeting!**

Next steps for the CNA Issue Committee will be to meet and begin the process of mapping out work and developing legislative concepts. To assist in the process, Hollis distributed a state by state comparison of CNA training requirements compiled by PHI. Hollis, Chris, Rosemary, Jillian, and Michelle volunteered to follow-up with colleagues to see if a law/health care graduate student might be interested in conducting a more thorough analysis of the data. Others present agreed to solicit additional letters of endorsement and forward them to Hollis ASAP. **UPDATE SINCE MEETING – Alison Hirschel of the MI Poverty Law Center and an instructor at the University of Michigan's Law School, has a law student who can begin work in June on examining and analyzing the laws and rules from those 25+ states that do not rely on the federal CNA training standards.**

### **3. Review of the recommendations of the MDCH Task Force on Nursing Regulations**

John King presented an overview of the Task Force recommendations to the MDCH Director regarding changes needed to improve the regulation of nursing in Michigan. The Task Force was asked to look at three issues: Nursing Regulation, Nursing Education, and the Practice of Nursing itself. The Task Force has recommended the formation of additional task forces to examine Nursing Education and Nursing Practice, and has focused on the Nursing Regulation piece.

The recommendations made for Nursing Regulation address the following:

- Increase funding to and flexibility of utilization of the Nurse Professional Fund.
- Encourage retired nurses who wish to practice nursing as volunteers to do so, and allow Public Health Code Provisions for Special Volunteer Licenses and liability exemptions.
- Support a change in the Public Health Code that adds definitions for certain Advance Practice Nursing specialties – Certified Nurse Midwives and Certified Nurse Practitioners.
- Exempt Bureau of Health Professional regulatory staff positions from current and future hiring freezes.
- Resolve inconsistencies among the Public Health Code, the School Code, and MIOSHA Statutes that affect the provision of in-school healthcare for children.

The recommendation for the MDCH Director to convene the two additional Task Forces on Nursing Education and Nursing Practice will impact long term care, and members of the LTCSSC Workforce Development Workgroup may wish to seek representation on both. It is expected that the additional Task Forces will be appointed this year, with work completed by early next year. Hollis will follow up with Andy Farmer at the full Commission meeting and request to have the Workforce Workgroup be involved in the two additional Task Forces.

Issues brainstormed by the workgroup for possible consideration by the additional Task Forces included:

- Looking at the relevance of required obstetric and pediatric clinicals for LPNs interested in long term care ( not eliminating the education piece, but eliminating the clinicals requirement)
- Having a standard review of curriculum of LPN and Associate Degree Nursing programs, and examining ways to eliminate credit differences between community colleges – there is a desire to create a career ladder, but inconsistencies in programs prevent this.
- Establish a state uniform curriculum for nursing.
- Create better clinical placement systems.
- Look at student to faculty ratios – may need to be adjusted for specialty areas.
- Have a uniform definition of terms defined in the Public Health Code – eliminate “nurse speak.”

#### **4. Review of “The Need for Monitoring the Direct Care Workforce and Recommendations for Data Collection”**

Rosemary presented an overview of the recommendations from the DSW Resource Center’s “white paper” on the recommendations for states for basis data collection. PHI played a huge role in the creation of the document, and Medicaid agencies can apply to the Resource Center for to receive technical assistance. The goal was to look at a minimum data set and ask two questions -- What could we glean from DLEG and other national databases? and Is there a potential to look at workforce volume and compensation data?

So far, the results indicate that the data is skewed. The over representation of public vs. private entities is probably an artifact of the public funding stream and the efficiency of data collection. In addition, turnover appears to be calculated in many different ways across databases, so

comparisons are difficult. There is a need to look at additional collection methods (like North Carolina's model of voluntary reporting with license renewals) that have definitions to standardize the calculation of turnover. The paper argues that each state needs to plan a statewide tracking by common measures, establish their own data set, and have a commitment to wanting the data.

Jean reported that she has been using an extensive database for collecting workforce data, suggested that the group look to work with such state databases that are already in existence. Next steps for the Data Issue Committee will be to examine what can be gleaned from existing state systems.

#### **5. Updates from Other Issue Committees**

No updates at this time.

#### **6. Other**

Hollis distributed a press release on the MDCH initiative and grant to the Detroit AAA to improve Detroit nursing home, and will make sure that the CNA curriculum enhancement recommendations are circulated to the Detroit group.

Lauren reported that information from the 2008 DSW Resource Center Symposium is now available to download from their website ([dswresourcecenter.org](http://dswresourcecenter.org)). One of the presentations included data from a national survey of Nursing Homes and over 3000 CNAs working in the field with results parallel to those from Michigan's *Voices From the Front*. Similar data was also presented from a survey of Home Health Aides that included a lot of data from private employers. The group is planning a survey of other types of residential care settings (licensed and non-licensed AFCs, Assisted Living, etc), but this survey has yet to be funded.

#### **7. Next Meeting: July, 23<sup>rd</sup>, 9:30-11:30, PHI's Offices at 1325 S. Washington in Lansing. Telephone conferencing information TBA.**